Urban Mold and Moisture Project Visual Assessment and Testing (F11)

Header Information

- □ Study ID: 1= Asthma Study, 2= Composite Study
- □ Family/Building ID: the household id number
- □ Phase: visit number should be 10 for EV1, 20 for EV2
- □ Address: complete street address
- □ Unit: 0=single family building, DN=down, UP=up, FRONT= front, REAR=back, # __=unit number
- □ City: city
- □ **Resident**: last name of participant
- □ Sanitarian: id number assigned to sanitarian (see codes)
- □ **Date**: date form was filled out

- Location/Room: 3 digit code identifying floor, room and bedroom
 Floor (1st digit): 0=basement, 1=1st, 2=2nd, 3=3rd, 4=4th, 8=exterior, 9=other
 Room (2nd digit): 1=basement, 2=kitchen, 3=bath, 4=attic, 5=TV/living room, 6=dining room, 7=bedroom, 8=exterior, 9=other
- **Bedroom (3rd digit)**: 0=proband (index child), 1=primary caregiver, 2=sibling #1, 3=sibling #2. 4=sibling #3

Example: a first floor living room code = 150, a second floor caregiver's bedroom = 271 In addition, FLOOR must be checked on each page of the VAT where applicable

Overview

Areas Inspected (not including XRF inspection):

- Exterior
- Basement
- Kitchen
- TV/Living Room
- Bath
- Index Child's Bedroom
- Attic
- Other rooms with visible mold

If the index child sleeps in the basement or attic, fill out both the bedroom form and the basement or attic form for that same room.

General Format

- Floor covering and condition
- Level of floor contamination/clutter/cleanability
- **HVAC Appliances**
- Moisture
- Mold
- Roaches
- Rodents
- Pets
- **Smoking**
- Other

Testing

- Surface moisture
- Carbon monoxide
- Carbon dioxide
- Temperature
- Humidity
- Vacuum dust samples
- Air samples (VOC, filter, biosample)